FORM PTO-1083

1 6 700



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Docket No.:

108298515US

September 10, 2002

In re application of:

Scott E. Moore

Date:

Filed:

oplication No.:

09/651,779

August 30, 2000

For:

METHODS AND APPARATUS FOR REMOVING CONDUCTIVE MATERIAL

Confirmation No.: 2448

FROM A MICROELECTRONIC SUBSTRATE

ASSISTANT COMMISSIONER FOR PATENTS WASHINGTON, DC 20231

SEP 2 0 2002

Sir:

Transmitted herewith is a Response Under 37 C.F.R. § 1.111 in the above-identified application. TECHNOLOGY CENTER 18700

Applicant claims small entity status. See 37 CFR 1.27.

Applicant has previously claimed small entity status. See 37 CFR 1.27.

A Petition for an Extension of Time for one month is enclosed.

A General Authorization Under 37 C.F.R. § 1.136(a)(3) is enclosed.

No additional claim fee is required.

The fee has been calculated as shown.

		(Col. 1)		(Col. 2)	(Col. 3)		
•		CLAIMS					
		REMAINING		HIGHEST	PRESENT		
.4		AFTER		PREV. PAID	EXTRA		
Ī		AMENDMENT		FOR			
		*		**			
	TOTAL	29	_	81	0		
		*		***			
	IND.	18	-	12	6		
	[ ] FIRST PRESENTATION OF MULT. DEP. CLAIMS  EXTENSION OF TIME FEE  TOTAL ADDITIONAL FEE						

SMALL	ENTITY		
RATE	ADDITIONAL FEE	OR	:
x 9	\$		x
x 42	\$		X
+130	\$	OR	+2
	\$	TOTA	AL.
		•	

	OTHER THAN A				
	SMALL ENTITY				
٧	RATE	ADDITIONAL FEE			
	x 18	\$	0		
	x 84	\$	504		
	+260	\$	0		
		<b>\$</b>	110		
TA	AL.	\$	614		
		L			

OTUED THAN A

Please charge my Deposit Account No. 50-0665 in the amount of \$\_. A duplicate copy of this sheet is enclosed. A check in the amount of \$614 is attached.

The Commissioner is hereby authorized to charge payment of the following additional fees associated with this communication or credit any overpayment to Deposit Account No. 50-0665. A duplicate copy of this sheet is enclosed.

Any filing fees under 37 CFR 1.16 for the presentation of extra claims.

Any patent application processing fees under 37 CFR 1.17.

Respectfully submitted,

PERKINS COIE LLP

John M. Wechkin

Registration No. 42,216

<sup>\*</sup> If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

<sup>\*\*</sup> If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

<sup>\*\*\*</sup> If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.